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PTO/SB/21 (09-04)  
Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

|  |    |                        |               |
|--|----|------------------------|---------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> |    | Application Number     | 09/802,686    |
|  |    | Filing Date            | March 9, 2001 |
|  |    | First Named Inventor   | Gary VAN NEST |
|  |    | Art Unit               | 1648          |
|  |    | Examiner Name          | T. Brown      |
| Total Number of Pages in This Submission   | 34 | Attorney Docket Number | 377882000900  |

| <b>ENCLOSURES (Check all that apply)</b>  |  |  |                          |
|---|--|--|--------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form + duplicate copy for fee processing - 2 pages<br><br><input type="checkbox"/> Fee Attached<br><br><input checked="" type="checkbox"/> Amendment/Reply (including Exhibits A & B + side tabs) - 30 pages<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request - 1 page<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Return Receipt Postcard |                          |
|   |  |  | <input type="checkbox"/> |

| <b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b> |  |          |        |
|---|--|----------|--------|
| Firm Name   | MORRISON & FOERSTER LLP (Customer No. 25226) |          |        |
| Signature   |  |          |        |
| Printed name                                      | Debra J. Glaister                            |          |        |
| Date  | March 20, 2006                               | Reg. No. | 33,888 |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 534437 505 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 20, 2006

Signature: (Debra J. Glaister)



PTO/SB/17 (12-04v2)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004

**Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)**

# **FEE TRANSMITTAL**

## **For FY 2005**

Applicant claims small entity status. See 37 CFR 1.27.

**TOTAL AMOUNT OF PAYMENT** (\$ 225.00) **Attorney Docket No.** 377882000900

**METHOD OF PAYMENT** (check all that apply)

Check    Credit Card    Money Order    None    Other (please identify): \_\_\_\_\_

**For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)**

Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17       Credit any overpayments

## **FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| <u><b>Application Type</b></u> | <u><b>FILING FEES</b></u> |   | <u><b>SEARCH FEES</b></u> |   | <u><b>EXAMINATION FEES</b></u> |   |                              |
|--------------------------------|---------------------------|---|---------------------------|---|--------------------------------|---|------------------------------|
|                                | <u><b>Fee (\$)</b></u>    | <u><b>Small Entity<br/>Fee (\$)</b></u> | <u><b>Fee (\$)</b></u>    | <u><b>Small Entity<br/>Fee (\$)</b></u> | <u><b>Fee (\$)</b></u>         | <u><b>Small Entity<br/>Fee (\$)</b></u> | <u><b>Fees Paid (\$)</b></u> |
| Utility                        | 300                       | 150                                     | 500                       | 250                                     | 200                            | 100                                     | 0.00                         |
| Design                         | 200                       | 100                                     | 100                       | 50                                      | 130                            | 65                                      | 0.00                         |
| Plant                          | 200                       | 100                                     | 300                       | 150                                     | 160                            | 80                                      | 0.00                         |
| Reissue                        | 300                       | 150                                     | 500                       | 250                                     | 600                            | 300                                     | 0.00                         |
| Provisional                    | 200                       | 100                                     | 0                         | 0                                       | 0                              | 0                                       | 0.00                         |

## **2. EXCESS CLAIM FEES**

**Fee Description**

|   |            |            |
|---|------------|------------|
| <b>Each claim over 20 (including Reissues)</b>            | <b>50</b>  | <b>25</b>  |
| <b>Each independent claim over 3 (including Reissues)</b> | <b>200</b> | <b>100</b> |
| <b>Multiple dependent claims</b>                          | <b>360</b> | <b>180</b> |

| Total Claims  | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|---------------|--------------|----------|---------------|---------------------------|
| 10            | - 20 =       | 0        | x 25          | = 0.00                    |
| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |                           |
| 1             | - 3 =        | 0        | x 100         | = 0.00                    |
|               |              |          |               | Fee (\$)                  |
|               |              |          |               | 180                       |
|               |              |          |               | Fee Paid (\$)             |
|               |              |          |               | 0.00                      |

### **3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <b>Total Sheets</b> | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| - 100 =             | /50                 | (round up to a whole number) x                          | 125             | = 0.00               |

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**4 OTHER FEE(S)**

**Non-English Specification \$130 fee (no small entity discount)**

Other (e.g., late filing surcharge): 2252 Extension for response within second month

225.00

|                   |   |                                      |        |                             |
|-------------------|---|--------------------------------------|--------|-----------------------------|
| SUBMITTED BY      |   |                                      |        |                             |
| Signature         |  | Registration No.<br>(Attorney/Agent) | 33,888 | Telephone<br>(650) 813-5725 |
| Name (Print/Type) | Debra J. Glaister   |                                      | Date   | March 20, 2006              |